

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1							61					
2							62					
3							63					
4							64					
5							65					
6							66					
7							67					
8							68					
9							69					
10							70					
11							71					
12							72					
13							73					
14							74					
15							75					
16							76					
17							77					
18							78					
19							79					
20							80					
21							81					
22							82					
23							83					
24							84					
25							85					
26							86					
27							87					
28							88					
29							89					
30							90					
31							91					
32							92					
33							93					
34							94					
35							95					
36							96					
37							97					
38							98					
39							99					
40							100					
41												
42												
43												
44												
45												
46												
47												
48												
49												
50												
TOTAL IND.	16											
TOTAL DEP.												
TOTAL CLAIMS												

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-878)

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
101	/						51					
2	/						52					
3	/						53					
4	/						54					
5							65					
6							66					
7							57					
8							68					
9							69					
10							60					
11							61					
12							62					
13							63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28	/						78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.							TOTAL IND.					
TOTAL DEP.							TOTAL DEP.					
TOTAL CLAIMS							TOTAL CLAIMS					

CLAIMS ONLY

SERIAL NO. 10671174 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15	1					
16	1					
17	1					
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29	1					
30						
31						
32						
33	1					
34						
35						
36						
37						
38						
39						
40	1					
41	1					
42	1					
43						
44						
45						
46	1					
47						
48						
49	1					
50	1					
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64	1					
65						
66						
67						
68						
69						
70	1					
71	1					
72	1					
73	1					
74	1					
75	1	3				
76	1					
77	1					
78	1					
79	1	3				
80	1	3				
81	1	3				
82	1	3				
83	1	3				
84	1	3				
85	1	3				
86	1	3				
87	1	2				
88	1	3				
89	1	3				
90	1	3				
91	1	3				
92	1	3				
93	1	3				
94	1	3				
95	1					
96	1					
97	1					
98						
99						
100						
TOTAL IND.	17					
TOTAL DEP.	124					
TOTAL CLAIMS	141					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	IND.	DEP.	IND.	DEP.	IND.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	1						51					
2							52					
3							53					
4							54					
5	1						55					
6		1					56					
7							57					
8							58					
9	1						59					
10		1					60					
11							61					
12							62					
13		1					63					
14							64					
15							65					
16	1						66					
17		1					67					
18							68					
19							69					
20	1						70					
21							71					
22							72					
23							73					
24							74					
25		1					75					
26							76					
27							77					
28	X						78					
29							79					
30							80					
31							81					
32							82					
33	1						83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	16						TOTAL IND.					
TOTAL DEP.	159						TOTAL DEP.					
TOTAL CLAIMS	75						TOTAL CLAIMS					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

17:35

114

51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100